

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT I
P.O. Box 1900, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Arriba Rd., Alamogordo, NM 87410

WELL API NO. 30-025-05769
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Lease Name or Unit Agreement Name NORTH MONUMENT G/SA UNIT BLK-15
2. Name of Operator AMERADA HESS CORPORATION	8. Well No. 14
3. Address of Operator DRAWER D, MONUMENT, NEW MEXICO 88265	9. Pool name or Wildcat EUNICE MONUMENT G/SA
4. Well Location Unit Letter <u>N</u> : <u>330</u> Feet From The <u>SOUTH</u> Line and <u>2310</u> Feet From The <u>WEST</u> Line Section <u>31</u> Township <u>19S</u> Range <u>37E</u> NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: CASING REPAIR & TEST <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.
PLAN TO MIRE PULLING UNIT. RU FREEPOINT & FREEPOINT 7" CSG. TIH W/MECHANICAL CSG-CUTTER CUT 7" CSG. AT ±1000' & TOH W/7" CSG. TIH W/KUTRITE SHOE & DRESS CUT. REPLACE WELLHEAD EQPT. TIH W/7" CSG. LEAD SEAL CSG PATCH ON NEW 7" CSG. HANG OFF CSG. IN CSG. HEAD. TIH W/RETRIEVING HEAD. TEST CSG. TO 500# FOR 30 MIN., & TOH W/RBP. OBTAIN CHART. TIH W/PKR. & PROD. EQPT. & RESUME PROD. WELL. (PROIR = ARCO PHILLIPS "A" #2)

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE: R. L. Wheeler, Jr. TITLE: SUPERVISOR OF ADMINISTRATIVE SERVICES DATE: 7-17-92
TYPE OR PRINT NAME: R.L. WHEELER, JR. TELEPHONE NO. 393-2144

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
DATE: JUL 27 '92